



## **South Central Public Health**

## **South Central Healthcare Preparedness Coalition Meeting Minutes**

November 15, 2017, 10:30 a.m.

**Attendees:** Alice Ash, Amanda Scott, Jackie Frey, Josh Jensen, Kim Vega, Larry Troxell, Lori Capps, Maria Hoggan, Nelson Long, Sara Otto, Scott Rasmussen

TOPIC	DISCUSSION
Welcome and Introductions	Jackie welcomed members to the meeting. Participants introduced themselves and the agency they represented.
Approve Minutes from the August 23, 2017 Meeting	The Minutes were approved as written.
Utilize geospatial hazard and risk data to conduct risk based planning for the healthcare system and RHCC for regional needs and priorities. Use of the previously completed JRA is suggested.  Collaborate with RHCC partners to ensure WebEOC boards that contain regional medical surge response assets and shelter information are updated/accurate	Several years ago, personnel at the University of Idaho completed a Jurisdictional Risk Assessment (JRA) for each health district in our state. Larry reviewed a portion of the JRA for coalition members and mentioned that risks identified had not changed much if at all. Most agencies have completed hazard vulnerability assessments (HVA) for their organizations although some of the CMS agencies may still be working on them. A copy of the HVA Excel spreadsheet was previously sent to coalition members to review and complete. Once the agency HVAs are complete, please send them to Larry and he will complete one HVA to provide to IDHW to meet our district requirement. If you need a copy of the HVA spreadsheet, please contact Larry and he will email one to you.  Between 2003 and 2014, we received grant funds that allowed hospitals to purchase supplies and equipment for emergency preparedness. The majority of that funding stopped in 2015 and funds received now can only be used for training and exercises. The previously purchased supplies and equipment have been updated into WebEOC by agency. This will allow us to see what resources are available in the event of an emergency. A CD was provided to coalition members at the August coalition meeting and it contains Annex H, our Medical Surge Plan. Annex H contains lists of those supplies and equipment and hospitals can review them to see if updates are required. Let Larry know if changes need to be made. Additionally, Public Health was provided funding several years ago to purchase supplies and equipment for Medical Sheltering. We recently completed an
Begin planning to expand regional boards to include specialty healthcare	inventory and will update that information into WebEOC moving forward.  This is a continuation of comments relating to updating information into WebEOC. We have not addressed pediatric preparedness to any great length in our coalition or purchased medical sheltering equipment to care for children. I was working toward having Dr. Gardner come to Twin Falls
personnel and facilities with	and make a presentation regarding pediatric preparedness. He is very busy and will not be able to make the trip until May/June of next year. We



particular focus on	will continue to work toward purchasing pediatric equipment and will
pediatric resources	advise members when we are able to schedule Dr. Gardner for a
in preparation for	presentation.
BP2 (2018 – 2019)	
Give priority to building partnerships that strengthen the ability of the RHCC to respond to the needs of individuals with chronic medical conditions including those who rely on electricity to power life-sustaining medical and assistive	The emPOWER website was accessed and members could see the data provided. We need to determine just how we can use the data as we move forward with future exercises. We do have the ability to research to see if any other websites provide data that might work better than emPOWER although nothing new has been found yet. We continue to work with coalition members to find ways to identify at-risk individuals to provide assistance if needed.
equipment	
Provide leadership	See above.
for the RHCC in	See above.
successfully	
obtaining and	
utilizing de-identified	
emPOWER data at	
least once in the first	
half of the subgrant	
period and at least	
once in the second	
half of the subgrant	
period	
Provide training to	See above.
the RHCC on a social	
vulnerability index	
(SVI) of its choice to	
identify at-risk	
populations in the	
region. Describe the	
population identified	
and enhancements	
to medical surge	
planning to meet the	
needs of that	
population.	
Complete a HVA for	If agencies have not yet completed a Hazard Vulnerability Assessment,
the RHCC that meets	please do so as soon as possible and email it to me when it is complete.
FOA criteria.	Larry will send the spreadsheet to coalition members again in case some



Agencies will bring	have not seen it.
HVAs previously	Have not seen it.
completed for review	
RHCC response plan	A committee of coalition members met and reviewed information provided
development	to create a response plan. The information allows us to reference the
	location of data currently in our documents, e.g. our By-Laws and Medical
	Surge Plan rather than writing a new plan. Our coalition is spread over a
	100-mile radius and one plan for all does not fit. The committee decided
	to provide information on where the data can be found and, if necessary,
	tweak the Medical Surge Plan to include any missing data. If any agencies
	need assistance writing internal operations plans, please let us know and we will provide assistance.
Ebola Functional	We have a draft scope of work for the Ebola subgrant, which includes
Exercise	other special pathogens, and we will need to complete a coalition exercise
EXERCISE	by the end of April 2018. We have completed exercises in the past and we
	can build a new exercise from our past experiences.
Coalition Assessment	Coalition members were shown the CAT and some of the information we
Tool Review	need to review and answer. This is a new requirement that we need to
	review and complete as a coalition. Larry will answer as many of the
	questions as possible but will require assistance to complete. We will look
	at the possibility of setting up a committee to work on this requirement.
National Incident	The National Incident Management System is new for this year. There are
Management System	ICS courses available for personnel to familiarize themselves with the
2017	Incident Command System. Specifically, we recommend the baseline
	courses ICS-100, ICS-200, and IS-700 to become familiar with the system. For individuals requiring advanced training, IS-800, ICS-300, and ICS-400
	are recommended. All courses can be taken online at the fema.gov
	website although the 300 and 400 courses are completed in a classroom
	setting.
What's Going On?	Jackie asked if we might change our meeting format. Specifically,
NEWS from the	would it be possible to put a checklist together to provide to members
SCHPC Members	ahead of the coalition meeting. When the members come to the
	meeting, they would be better prepared to discuss the agenda items,
	which might shorten the meeting. Other members agreed. Jackie and
	Larry will meet to discuss how to format this information to provide to members. Twin Falls County is updating their Emergency Operations
	Plan (EOP). Jackie is working with the West End First Responders on a
	2018 exercise. Jackie is updating a resource inventory tracker for Twin
	Falls County.
	<ul> <li>Josh advised that we have quite a few items on our list in Public</li> </ul>
	Health. We have the Coalition Surge Test coming up in April 2018.
	We are looking to have a tabletop exercise regarding flooding with
	local partners and will send invitations out once we know more. We
	are preparing to provide Medical Reserve Corps (MRC) orientation for
	both old and new members. We are also planning to conduct a full-
	scale Point of Dispensing (POD) exercise sometime in 2019. We are preparing a training plan and will include healthcare agencies in the
	exercise.
	<ul> <li>Kim mentioned that Minidoka Memorial Hospital (MMH) and Minidoka</li> </ul>
	- Rath mendoned that Filmdona Flemonial Hospital (Film) and Filmdona



Meeting Dates (please add to your calendar)	All Healthcare Preparedness Coalition meetings are scheduled on the fourth Wednesday from 10:30 to 3:00 p.m. unless otherwise noted  Locations subject to change  South Central Healthcare Preparedness Coalition (SCHPC)  August 23, 2017  To be held at St. Luke's Jerome, Lower Level  November 15, 2017  To be held at Cassia Regional Hospital  February 28, 2018  To be held at Minidoka Memorial Hospital  May 23, 2018  To be held at St. Luke's Magic Valley
Adjourn	County are working toward planning and training for an Active Shooter exercise next year. That will give MMH an opportunity to test their new Emergency Operations Center (EOC).  Nelson spoke about MRC orientations being held at Public Health on November 29 <sup>th</sup> and December 4 <sup>th</sup> . He is also working to schedule a CPR/First Aid course for MRC volunteers in the future. He is also looking to include MRC volunteers in the POD exercise in 2019. This will require training ahead of the exercise. Jackie mentioned that she could assist in getting some Community Emergency Response Team (CERT) members to assist in the exercise.  Larry mentioned that we are planning to send nine healthcare personnel to the Center for Domestic Preparedness (CDP) in Anniston, Alabama to attend a Healthcare Coalition Response Leadership Course in February 2018. We are currently waiting for confirmation from CDP which should be sometime after the first of the year. We are also conducting a Coalition Surge Test during April 2018. This will simulate evacuation of 20% of available beds to alternate locations. We are in the planning process at this time. We recently held a CMS Rules workshop that was well attended. We are available to assist agencies with information and help with planning for exercises. We cannot facilitate exercises specifically for those agencies but can include them in exercises we may be running if possible.  The meeting was adjourned at 2:00 p.m.